Application For Employment

Please **TYPE** or **PRINT** clearly. To be considered for employment, this *Application for Employment Form* must be completed and signed personally by the applicant. Each question must be answered in full, even if a resume is provided. If an answer is NO or NOT APPLICABLE, indicate such.

We are an **Equal Opportunity Employer.** We consider all applications for all positions without regard to race, color, religion, gender, national origin, age, sexual orientation, genetic predisposition or carrier status, disability, marital status, pregnancy, veteran status, or any other legally protected class or status. Please notify a company representative if you require a reasonable accommodation to participate in the application and/or interviewing process.

	Name (First, Middle, Last)				Telephone Number				
	Street Address								
BIOGRAPHICAL DATA	City				State			Zip Code	
	Position Applied For				Salary or Hourly Wage Desired \$				
	Are you Available to Work ☐ Full-Time ☐ Part-Time ☐ Tempora (check all that apply) ☐ Day ☐ Evening ☐ Nights				Date Available to Begin Work				
	Are you 18 years of age or older?						☐ Yes ☐] No	
OGRA	Are you currently employed?						☐ Yes ☐	□No	
B	Have you ever submitted an application and/or interviewed for employment with our company? If yes, give month and year/						☐ Yes ☐	□No	
	Have you ever been employed with our company before? If yes, give dates. From/ to/						☐ Yes ☐ No		
	Are you legally eligible for employment in the United States? Employment eligibility will be verified upon employment.						☐ Yes ☐ No		
	If you have had an opportunity to review a job description for the position for which you are applying, can you perform the essential functions of this job with or without reasonable accommodation? (check N/A if you have not reviewed a job description)						☐ Yes ☐] No	
EDUCATIONAL BACKGROUND	Type of School Attended	Name and Location of School		# of Years Complet		Did you Graduate?		or Degree ained	GPA
	High School				() Yes) No			
	College				() Yes			
	Dates Attended	From	То		() NO			
	Other				() Yes) No			
SKILLS	List any additional skills, training, and/or technical/professional knowledge that is relevant to the job for which you are applying:			List any certificates, licenses, or professional achievements that would support your qualifications for employment:					
S		Identification Number:	State of Issuance: of the position for which you are applying)						

EMPLOYMENT HISTORY Provide employment recent employer first. If you've held more than three jobs	nt information, inclu	iding military service, for the last 15	years, starting with the most o this form.
Name of Employer	, , ,	Telephone Number	
Address Street	City	State	Zip Code
Employment Dates (Month/Year) From/ to/		Starting Hourly Wage/Salary	Final Hourly Wage/Salary
Job Title of Position(s)		Name and Job Title of Supervisor	
Brief description of job duties, responsibilities and significant ac	complishments:		
Reason for leaving:			
Name of Employer		Telephone Number	
Address Street	City	State	Zip Code
Employment Dates (Month/Year) From/ to/		Starting Hourly Wage/Salary	Final Hourly Wage/Salary
Job Title of Position(s)		Name and Job Title of Supervisor	
Brief description of job duties, responsibilities and significant ac	complishments:		
Reason for leaving:			
Name of Employer		Telephone Number	
Address Street	City	State	Zip Code
Employment Dates (Month/Year) From/ to/		Starting Hourly Wage/Salary \$	Final Hourly Wage/Salary
Job Title of Position(s)		Name and Job Title of Supervisor	
Brief description of job duties, responsibilities and significant ac	complishments:		
Reason for leaving:			
REFERENCES List three references other than re	latives or former su	pervisors	
Name/Occupation Addres	s	Telephone #	Years Known
1.			
2.			
3.			

CONVICTION RECORD STATUS								
All applicants and employees must, as a condition of employment, inform the company of all convictions. This includes all convictions received within the past seven years, while your application for employment is pending, and within seven days of receiving a conviction if currently employed.								
Have you been convicted of, and/or plead guilty to, a felony or misdemeanor in the past seven years?								
If you answered 'yes' and have been convicted of a felony or misdemeanor, please provide additional information below, such as the crime(s), date(s), court location, sentencing information, disposition of sentence, and rehabilitation completed. Please note that a 'yes' answer to this question does not necessarily disqualify an applicant from employment. Factors that will be taken into account include the nature of the conviction as it relates to the job applied for, the amount of time that has elapsed since the conviction and/or completion of sentence, and the seriousness of the offense. The company reserves the right to reject individuals for employment based on job-related convictions.								
Date of Offense	County and State in Conviction/Explanation which Offense Occurred		Rehabilitation Completed					
DIFACE	DEAD CAREFULLY	/ AND CION DELOW						
PLEASE	READ CAREFULL	AND SIGN BELOW						
I hereby certify that all of the information I have provided on this <i>Application for Employment Form</i> is true and correct to the best of my knowledge. I understand that any misrepresentation or omission of material facts will disqualify me from further consideration of employment, withdrawal of any offer of employment, or, if employed, termination of employment.								
I authorize verification of all of the information I have provided on this <i>Application for Employment Form</i> as well as any additional information needed to consider my application for employment. I further authorize all former employers, educational institutions, references, and other persons who have knowledge of me or my records to provide any and all information pertinent to my employment and release the same from any liability resulting from providing such information. I also release this company and its employees from all liability for any damage that may result from reliance on the information furnished.								
If employed, I agree to abide by all policies, procedures, and rules of the company. I understand and agree that, if hired, my employment is for no definite period and may, regardless of the date of payment of my wages or salary, be terminated by myself or the company at any time with or without cause or notice. I further understand that the policies, procedures, rules, and benefits contained in the employee handbook, benefit plans, and other written documents should not be considered an employment contract for any period of time.								
Date	Date Signature of Applicant							